

UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF WASHINGTON

In re: RANDY M. SCHELL AND  
BEVIN N. SCHELL

Debtor(s).

Case Number: 09-48122  
COURT DOCUMENT #58  
**Petition for Payment  
of Unclaimed Funds**

1. I am petitioning to receive funds in the total amount of \$ 9164<sup>06</sup>, which amount was paid into the Court on 12/11/2015 [date(s)] by the case trustee as unclaimed funds on behalf of the following creditor/debtor:

Name: ROBERT L. ORR

Address: 5752 N PLEASANT WAY COEUR D'ALENE IDAHO 83815

Last four digits of SS# or Tax ID#: 2965

FILED  
Western District of Washington  
at Seattle

2. I believe I am entitled to receive the requested funds based upon the following [check the statement(s) that apply]:

- ☒ a. I am the creditor/debtor named in paragraph 1, and the owner of the funds appearing on the records of this Court, as evidenced by the attached documents, including a current driver's license and social security card (if an individual).
- ☐ b. I am the attorney in fact for the creditor/debtor named in paragraph 1, with authority to receive such funds, and am authorized by the attached notarized, original, Power of Attorney to file this application on the behalf of the creditor/debtor.
- ☐ c. I am the assignee or successor-in-interest of the creditor/debtor named in paragraph 1, or the assignee's or successor-in-interest's representative, as evidenced by the attached documents establishing chain of ownership and/or assignment.
- ☐ d. I am a duly authorized corporate officer (if a corporation) or a general partner (if a partnership) and a representative of the creditor/debtor named in paragraph 1, as demonstrated by the attached documentation, including, if applicable, the corporate seal.
- ☐ e. I am the representative of the estate of the deceased creditor/debtor named in paragraph 1, as evidenced by the attached certified copies of death certificate and other appropriate probate documents which substantiate my right to act on behalf of the decedent's estate.
- ☐ f. Subparagraphs (a) through (e) above do not apply. As evidenced by the attached documents, I am entitled to such monies because: \_\_\_\_\_

3. I have no knowledge that any other party may be entitled to these funds and I am not aware of any dispute regarding these funds.

4. Pursuant to 28 U.S.C. § 2042, on 12/14/2015 [date], I mailed a copy of this completed application (with all supporting documentation) to: United States Attorney, 700 Stewart St., Ste. 5220, Seattle WA 98101-1271.

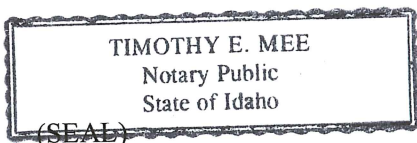
I understand that, pursuant to 18 U.S.C. § 152, I shall be fined not more than \$5,000, or imprisoned not more than five years, or both, if I have knowingly and fraudulently made any false statements in this document or the accompanying supporting documents. I further understand that any indications of fraud detected by the Court will be turned over to the U. S. Attorney for possible prosecution.

I declare (or certify, or verify, or state) under penalty of perjury under the laws of the United States of America, that the foregoing statements and information are true and correct.

Dated: 12/14/15 Petitioner's Signature Robert L Orr  
Petitioner's Name ROBERT L ORR  
Address 5752 N PLEASANT WAY  
COEUR D'ALENE IDAHO 83815  
Telephone Number (208) 660-1112

NOTARY:

On this day, December 14<sup>th</sup>, 2015, I certify that I know or have satisfactory evidence that (insert name and title of signer) Robert L Orr is the person who appeared before me, and said person acknowledged that (he/she) signed this instrument and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in the instrument.



[Signature]  
Notary Public  
My commission expires 1/3/18  
State of Idaho  
Residing at Kootenai County